

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/578,032

FILING DATE

5/2/06

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1					51					
2				1	-			52					
3				1	-			53					
4				1	-			54					
5				1	-			55					
6				1	-			56					
7			2					57					
8				1	-			58					
9				1	-			59					
10				1	-			60					
11				1	-			61					
12				1	-			62					
13				1	-			63					
14				1	-			64					
15				1	-			65					
16				1	-			66					
17				1	-			67					
18				1	-			68					
19				1	-			69					
20				1	-			70					
21				1	-			71					
22				1	-			72					
23				1	-			73					
24				1	-			74					
25				1	-			75					
26				1	-			76					
27			2					77					
28				1	-			78					
29				1	-			79					
30				1	-			80					
31				1	-			81					
32			2					82					
33								83					
34								84					
35			2					85					
36				1	-			86					
37				1	-			87					
38				1	-			88					
39				1	-			89					
40				1	-			90					
41				1	-			91					
42				1	-			92					
43				1	-			93					
44				1	-			94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.				1									
TOTAL DEP.				37									
TOTAL CLAIMS				38									